



THE UNIVERSITY *of* EDINBURGH

Edinburgh Research Explorer

Theology and Therapy

Citation for published version:

Fergusson, D 2012, 'Theology and Therapy: Maintaining the Connection', *Pacifica*, vol. 26, no. 1, pp. 3-16.
<https://doi.org/10.1177/1030570X12469087>

Digital Object Identifier (DOI):

[10.1177/1030570X12469087](https://doi.org/10.1177/1030570X12469087)

Link:

[Link to publication record in Edinburgh Research Explorer](#)

Document Version:

Peer reviewed version

Published In:

Pacifica

Publisher Rights Statement:

The final published version is © SAGE and Fergusson, D. (2012). Theology and Therapy: Maintaining the Connection. *Pacifica*, 26(1), 3-16doi: 10.1177/1030570X12469087

General rights

Copyright for the publications made accessible via the Edinburgh Research Explorer is retained by the author(s) and / or other copyright owners and it is a condition of accessing these publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

The University of Edinburgh has made every reasonable effort to ensure that Edinburgh Research Explorer content complies with UK legislation. If you believe that the public display of this file breaches copyright please contact openaccess@ed.ac.uk providing details, and we will remove access to the work immediately and investigate your claim.



Theology and Therapy: Maintaining the Connection

David Fergusson

Abstract: The important interaction of theology and psychotherapy in the mid-20th century is reviewed, with particular given to the formative role of personalist philosophy and its practical outcomes. After exploring the reasons for the relative decline in the interaction of these disciplines, at least as far as much mainstream theology is concerned, some proposals are offered for reinvigorating the links. These involve recognising the therapeutic and liturgical significance of traditional theological themes such as self-love, providence and vocation.

Key words – theology, psychotherapy, personalism, relationality.

In the mid-twentieth century, there were concerted efforts to bring theology into closer interaction with theories of counselling and psychotherapy. This served several purposes. One was to enlist emerging therapeutic discourses and practices in the service of the church. A more informed and professionalised understanding of pastoral ministry was sought, with particular reference to meeting more adequately the needs of those inside and outside the churches. This coincided with a significant growth of counselling centres, the emergence of specialist ministries, and a plethora of writings and conferences dedicated to the interaction of theology with therapeutic practice. The theological syllabus in colleges and universities also underwent some important changes from around the 1960s with the growth of courses and programmes of study in pastoral theology and counselling. Insights from psychology were increasingly valued, these being accommodated by theology and church practice, not least in the self-understanding of clergy whose lack of training and own shortcomings in this area were more openly acknowledged. This was a particular attraction of Frank Lake's clinical theology. Today it is now commonplace for many dioceses and presbyteries to provide counselling and support to clergy who themselves experience psychological stress and burnout. Comparative work with other professions has proved useful, not least in tackling the hitherto neglected problem of bullying within congregations.¹

Reading some of the literature from that period, one is impressed by its thoughtful, wide-ranging and informed reflections on the ways in which theology and psychotherapy can benefit from closer interaction. By contrast, the contemporary theological scene has become more fragmented with too much specialism and insufficient interaction between the different components of the syllabus and other disciplines with overlapping interests. Significant attention continues to be devoted to the relationship between theology and psychotherapy, especially in the USA, but this has become an increasingly specialist branch of pastoral theology by contrast with which more 'mainstream' activity has become remote. This is a source of recurrent complaint from theological educators today.² The professional formation of ministers suffers from the manner in which the standard components of the theological curriculum fail properly to connect with each other. There is also impatience in many quarters with the division between systematic and practical theology, particularly amongst practitioners in those parts of the world where academic theology is more closely related to the interests of the church. Some repair work is now needed that can bring the

¹ See for example the 2001 report submitted by the Society of Mary and Martha.

<http://www.baltnet.co.uk/clergy stress.htm>.

² See Dietrich Werner, 'Ecumenical Learning in Theological Education: The World Council of Churches Perspective', *Expository Times*, 123 (2011), 1–11

different subjects of theological reflection into closer contact, without sacrificing the rigour and scholarly depth that often characterise specialist enquiry in a more clearly delineated field. Similar remarks might be made about the professionalisation of counselling as a parallel process which has similarly encouraged specialisation and differentiation, with some resultant disconnection from other forms of enquiry.

One danger in attempting interdisciplinary research is to over-simplify the other field as if one can quickly identify consensus findings that can be readily appropriated and integrated with one's primary expertise. Psychotherapy itself may be at least as variegated as theology and church life. Populated by different and sometimes competing approaches, it is a field that itself has experienced much fragmentation and internal conflict.³ For the theologian, however, one place to begin is with those broader philosophical accounts which seek to situate therapy for the client in a wider context of meaning and fulfilment, including notions of the spiritual, the sacred, the religious and the transcendent.⁴ In understanding ourselves and our life stories, we carry within ourselves these broader categories of meaning, even if they remain implicit, half-formed and fluid. The openness of such approaches to wider questions of meaning and context generates the possibility of drawing upon resources from other areas of enquiry, including theology.

In relating the discrete disciplines of theology and psychotherapy, many exponents were decisively influenced by the development of personalist thought in the first half of the twentieth century. This afforded several advantages, in particular the possibility of a holistic and relational account of the human person that could accommodate the insights of different discourses without prioritising any one of these. It is not surprising, therefore, that personalist themes were appropriated by theologians, psychologists and psychotherapists on both sides of the Atlantic. For theologians, in particular, there were further links with Trinitarian doctrine and anthropology that were already recognised before the more popular appeal of writers such as Moltmann, Zizioulas, Boff and Pope John Paul II.⁵

Many of the personalist approaches that flourished in education and psychology from the mid-twentieth century borrowed extensively from the philosophy of John Macmurray (1891–1976).⁶ Macmurray was a philosopher who sought to bring his subject into close contact with wider trends in social and intellectual life. A leading figure in the Christian left during the 1930s, he interacted with churches and a range of professional bodies. Frustrated by the narrower interests of many philosophical

³ A recent study has likened the disruption of schools of psychotherapy to the schismatic nature of Presbyterian churches. See Trevor Dobbs, *Faith, Theology and Psychoanalysis: The Life and Thought of Harry S. Guntrip* (Eugene, OR: Pickwick, 2007).

⁴ Here I am alluding not to those 'humanistic-existential' approaches which can function as one type of psychoanalytic theory (over against others) so much as a philosophy that seeks to offer some underpinning and contextualisation within which different theories can be situated.

⁵ E.g. C. J. Webb, *God and Personality* (London: Allen and Unwin, 1918) and Leonard Hodgson, *Doctrine of the Trinity* (London: Nisbet, 1944). Again, I am referring to personalism more as a philosophical framework for understanding approaches to counselling and therapy than as a distinctive type of therapy as in Carl Rogers' 'person-centred' or 'client-centred' therapy. See Richard Nelson-Jones, *Theory and Practice of Counselling and Therapy*, 5th edition (London: Sage, 2011), 85–115.

⁶ In what follows, I have borrowed from a more detailed study of the influence of Scottish philosophical traditions upon person-centred approaches to counselling and psychotherapy. See David Fergusson, 'Persons in Relation: the interaction of philosophy, theology and psychotherapy in 20th century Scotland', *Journal of Practical Theology*, 2013, forthcoming.

colleagues, he proved more influential outside than inside his own professional guild. His output was marked not so much articles in specialist journals as by popular writings, BBC radio broadcasts and numerous talks and lectures.⁷

Macmurray's work from the 1920s onwards represents an attempt to develop a personalist vision of philosophy which can be employed in different fields of study and professional practice. Although expressed more analytically, it resonates in many ways with the work of Martin Buber on the European continent. The self is not the disembodied and detached mind of the western tradition, as for example in the *Meditations* of Descartes. Instead, the self is an agent that is positioned in a physical and social world. Its identity cannot be exhausted by material or organic patterns of explanation. These are important to understanding the human being, but an adequate description requires also the language of the personal which is not reducible to material or organic causal laws. A relational self, the person interacts with other persons in ways marked by freedom, love and friendship. Self-fulfilment is therefore found only in community, and it is in its promotion of community life that the real significance of religion is to be found.

All this may be summed up by saying that the unit of personal existence is not the individual, but two persons in personal relation; and that we are persons not by individual right, but in virtue of our relation to one another. The personal is constituted by personal relatedness. The unit of the personal is not the 'I' but the 'You and I'.⁸

This holistic approach requires that the patient or client be viewed as a person and not merely as an organic entity. This personal context determines the relationship that exists between professional and client, and hence it must also condition the former's understanding of the situation, needs and direction of the client. The person aims at friendship, freedom and love; this cannot be entirely bracketed out of professional relationships. In addressing professional groups, Macmurray would remind his audience that in working with their clients, patients or pupils they were dealing with persons and not mere objects of study.⁹ If we do only the latter – seek to present our subject – then we will fail to attend to the important personal dimension of the teacher-pupil relationship. This applies also to the relationships between doctor and patient, and therapist and client.

A proper understanding of the setting of human life is one that aspires not towards independence or detachment but towards the realisation of co-dependency and inter-relatedness. The paradigm for this is the mother-child relationship. From the beginning, it is a highly structured complex of interactions and patterns of behaviour which not only enskill the child and enable it to take its place in a community of relations, but also provide a source of mutual delight for mother and child. In growing up, the child does not cease to be interrelated and dependent but rather transposes these into the terms of mature adult existence, in particular with reference to free, conscious activity.

⁷ For further information see John Costello SJ *John Macmurray: A Biography* (Edinburgh: Floris Books, 2002) and Esther McIntosh, *John Macmurray's Religious Philosophy: What it Means to be a Person* (Aldershot: Ashgate, 2011).

⁸ *Persons in Relation* (London: Faber & Faber, 1961), 61.

⁹ 'A Philosopher Looks at Psychotherapy', *Individual Psychology Pamphlets*, 20, 1938, 10.

When dealing with issues in medicine, Macmurray insists upon the importance of the whole psycho-physical field in understanding the condition of the patient.¹⁰ While conceding that he speaks as a layperson in this respect, he points out that each of us knows what it is to be a patient in a doctor's surgery. In almost all cases, the patient is asking the doctor to help him or her, and in doing so is generally anxious about a condition, an ailment or a problem. The reaction of the doctor can increase or diminish this anxiety.¹¹ Often the underlying condition is explained by a physiological cause that can be remedied by the appropriate prescription of drugs. However, we cannot assume that this is always the case. There are forms of anxiety that do not have a primary organic explanation and it is these with which the psychotherapist, counsellor and pastor are typically faced. Although genuinely felt, much of this anxiety is imaginary and groundless; its cure lies in achieving the dominance of more positive motivations. These comprise faith, trust and love of others. To establish these, there must be mutual confidence between doctor and patient, therapist and client. Their relationship itself is an instance of the personal, a token of trust and friendship.

One of the few sources that is cited in his Gifford Lectures is Ian Suttie's 1936 study *The Origins of Love and Hate*. Macmurray had encountered this work shortly after its publication. Its thesis is that love as the need for companionship was a deeper need than Freud had understood and it is the primary element in a child's relationship with its mother. Macmurray found in Suttie's work the empirical confirmation for lines of argument that he had been developing philosophically, and in his subsequent output Suttie is used extensively. Prior to his premature death in 1935, Suttie had moved to the Tavistock Clinic in London, an organisation that undertook pioneering work in psychotherapy. Its first director, Hugh Crichton-Miller also wrote on the subject of religion and psychology in ways that further resonate with this person-centred relational philosophy.¹² Macmurray's work was later appropriated by an array of groups, practitioners and theorists in different parts of the world. These include Harry Guntrip in Leeds, R. D. Laing in Glasgow, Francis McNab in Melbourne and Ray Anderson in Pasadena.

This approach resonates with much of the work of the churches from the 1960s onwards with its stronger accent on pastoral care, on counselling centres, and on the importance of house-groups where people could meet, converse and interact in ways that were less constrained by the more formal activities and physical environment of the churches. Further inspiration came from the Iona Community and the vision of its founder, George McLeod. The focus on community, incarnation and a reaching out to the physically and emotionally deprived were apparent. House groups became not an alternative to patterns of worship and church organisation, but a complementary activity that created a non-threatening space for different types of interaction amongst members and adherents. More specialist chaplaincy ministries became increasingly common, these no longer being limited to the armed forces, but established in hospitals, universities, prisons and industrial workplaces. Programmes in practical theology emerged, these often combining psychological and theological approaches.

¹⁰ See 'A Philosopher Looks at Psychotherapy', op. cit., 9–22.

¹¹ Macmurray does not consider whether the doctor may also experience some levels of anxiety in relation to fulfilling his or her role.

¹² For a recent discussion of Suttie's importance for the independent tradition in British psychoanalysis see Gabriele Cassullo, 'Back to the Roots: The Influence of Ian. D. Suttie' on British Psychoanalysis, *American Imago*, 67 (2010), 5–22.

Perhaps not surprisingly, the relationship between psychotherapy and theology was jeopardised by attempts to achieve a premature integration or synthesis of different disciplines and forms of activity. In many ways, this was understandable. The religious roots and motivation of several key practitioners led to an enthusiasm to reach a single discourse of therapeutic theology or equally theological psychotherapy. This could lead to two contrasting problems. On the one side, there was a tendency to pour religion into the moulds that had been created by psychotherapeutic theories. As a result, much that was distinctive in theology was at risk of being reduced to an epiphenomenon or a spiritual dimension of psychotherapeutic goals. In some cases, the translation of theological categories into psychological ones seemed to evacuate the language of God of any real significance and consign Jesus to the status of a prophet or moral exemplar. Of course, there are legitimate theological arguments and disagreement around these issues, but these are primarily theological not psychotherapeutic. To reach too quickly for a synthesis of discourses runs the risk of distortion and loss of understanding; this may have been a particular temptation from those who were fleeing traditional patterns of Christian belief and affiliation in the mid-20th century. But there was also a danger from the other side. The appropriation of psychotherapy could be similarly eclectic and amateurish, undoubtedly a problem given the diversity and contested discourses of experts in the field. The difficulty in acquiring expertise and in making critical judgements about competing approaches could too easily elude the non-specialist. Even more problematic is the notion that there might be a distinctively Christian type of psychotherapy which could quickly be pressed into the service of some highly specific and determinate confessional assumptions, whereas a looser fit might work better. The notion of a distinctively Christian counselling or psychotherapy, contrasted other therapies, is one that probably needs to be resisted, as opposed to a more professional counselling or psychotherapy carried out by individual Christians or institutionally facilitated by the churches or set within the context of a Christian worldview.¹³ At the same time, a narrow and over-medicalised approach to psychotherapy may tend to bracket the wider spiritual questions that are present on both sides of the client-therapist relationship. In this context, Liz Bondi has written that ‘the therapeutic process...cannot survive the instrumentalisation implicit in ‘efficiency’. Rather, the psychotherapeutic process eschews such calculation and needs to enable “nothing to happen” or “time to be wasted” and similar “inefficiencies”’.¹⁴

The need for a premature integration of disciplines and methods should be resisted. There are good precedents here from other discourses and fields of enquiry, e.g. history, medicine and the natural sciences. We tend to think in terms of complementary patterns or layers of understanding and explanation, discourses that might repose upon each others in important ways but which remain distinct and irreducible. Stephen Jay Gould’s famous notion of NOMA (*non-overlapping magisteria*) might serve quite well in this domain also, especially as there is a growing need to relate psychotherapy to a plurality

¹³ The Association of Christian Counselling, while stressing the importance of a Christian worldview, also acknowledges a legitimate diversity of approaches practised by its counsellors. Christian counselling is described as ‘that activity which seeks to help people towards constructive change and growth in any or every aspect of their lives through a caring relationship and within agreed relational boundaries, carried out by a counsellor who has a Christian worldview, values and assumptions’. See <http://www.acc-uk.org/1410/>.

¹⁴ ‘Research and therapy: generating meaning and feeling gaps’, *Quantitative Inquiry* forthcoming, 2013. There are some striking parallels here with those traditions in spiritual theology which emphasise prayer as ‘time wasted’ with God.

of faiths and not simply Judaism and Christianity. These disciplines represent different domains with their own descriptive terms and methods of evaluation. There are points of contact and tension which can shift and alter across time, but we are dealing here with different and complementary forms of understanding each of which has its own integrity and scope. The relationship is one in which partial analogies and links can be made, but with an awareness of the different conceptualities that are employed. These are neither reducible one to another, nor capable of full systematic integration.¹⁵ The philosophical description of personhood in Macmurray and others may work well in this context precisely because it is neither theologically nor psychotherapeutically freighted in any strong way. While providing a set of concepts which enable fruitful connections to be drawn between the two disciplines, it also affords space for different forms of understanding to flourish. For example, an understanding of sin, forgiveness and reconciliation is central to a Christian theological account of the self in relation to God and others. Yet this discourse should neither suppress nor itself be supplanted by psychotherapeutic descriptions which can offer an awareness of the dynamics of the self in relation to others. The successful use of one set of concepts, with its own grammar and vocabulary, does not preclude co-existence with another. The real enemy here is a totalising approach which assumes that one type of description is exhaustive and therefore exclusive. The task of juxtaposition and connecting may present some problems, but it may be better to leave this open and unresolved than too readily to dismiss key insights for the sake of an enforced, comfortable or lazy coherence.

In surveying much of the work that was undertaken in the 20th century, one cannot avoid the sense that much of the impetus was lost after about the 1960s and 70s, particularly after the passing of some of the inspirational and pioneer figures. Concerted attempts at integration of theology and psychotherapy have been less conspicuous, at least in the UK, although there do remain some important examples. Why is this so? One factor is that psychotherapy and counselling have moved, perhaps inevitably, towards a greater degree of professionalization and specialism in terms of training, accreditation and association. This has generated an understandable shift towards independence and professional autonomy. As far as the churches are concerned, these have been in rapid decline in most western societies since this period, a decline that currently shows no signs of arresting. The causes of this process have been explored by Hugh McLeod in his recent study of the religious crisis of the 1960s.¹⁶ One effect of this was that energy and resources were increasingly required to shore up declining institutions – this left less time and opportunity for more outward-facing, exploratory ministries. Reviewing the work of Ronald Gregor Smith and others on secular Christianity, a contemporary scholar is likely to be struck by the confidence they displayed in the position of the church in society and its capacity to exercise widespread influence. There has also been a theological reaction against the perceived liberalism of the mid-20th century, both in Protestant and Roman Catholic circles. This has resulted in concerns about the dilution of distinctive Christian tenets. As a result we have witnessed a consequent reassertion of theologies that are less inclined to enter into conversation and accommodation with other disciplines and activities. This is now becoming

¹⁵ A similar methodological relationship is defended by Deborah van Deusen Hunsinger in *Theology and Pastoral Counseling: A New Interdisciplinary Approach* (Grand Rapids: Eerdmans, 1995). This is illustrated by the ways in which forgiveness and healing can coincide while remaining conceptually distinct and asymmetrical.

¹⁶ Hugh McLeod, *The Religious Crisis of the 1960s* (Oxford: Oxford University Press, 2007).

superseded by fresh trends which reflect the drive towards greater inter-disciplinarity in the academy and in government research councils.

At the same time, it can be argued that the disappearance of wider philosophical and theological appropriations of psychotherapy has resulted in a narrowing of focus that is unhelpful for the latter. Noting the 'therapeutic turn' in contemporary culture, Charles Taylor points out that the restriction of strategies to biochemical and medical approaches can lead to a bracketing out of wider notions of meaning. The therapeutic avoidance of these existential notions may lead to their suppression or displacement in ways that can be restrictive or even damaging. Macmurray's philosophy points to the personal goals of love, freedom and relational integrity; yet if psychotherapy restricts itself to the language of 'cure', then its goals will tend to be confined to treating pathological symptoms rather than articulating and realising some wider holistic ends, which admittedly may be much harder to realise and to quantify. Such an approach will reduce the personal to the level of the organic.

T]o have tried to get rid of an unease that one really needed to understand is crippling; the more so in that within the culture of the therapeutic, the various languages, ethical and spiritual, in which this understanding can be couched become less and less familiar, less and less available to each new generation...The issue is whether one can speak of a pathology alone, or whether there is also a spiritual or ethical hermeneutic to be made.¹⁷

Twentieth-century debates have taught us much about the ways in which the languages of psychotherapy and religion can fruitfully interact. These are positive and enduring gains which include a better understanding of the self with its unconscious and half-conscious anxieties and hurts. It is such selves that are the focus of pastoral care and so a fuller understanding of their dynamics is needed. Similarly, the holistic understanding of the person as embodied, social and relational resonates with much of the Biblical tradition and provides a corrective to theologies that privilege the spiritual over against the physical as if we could detach the true self from all the material, organic and psychological conditions that contribute to its formation. Attention given to the relationship of therapist to client has much pastoral and theological significance also, particularly in its underscoring of the need for respect, love, attentiveness and acceptance within the parameters of that relationship. The moral and spiritual significance of love itself requires to be explored. At this juncture, further questions tend to arise. Why does this matter so much to us, and what does it tell us about who we are and how we ought to live? The activity of the psychotherapist raises issues about the moral and spiritual framework within which we understand our personhood and its goals. Don Browning points to 'the question as to whether the agent of change is the finite relationship or what it implies about some over-belief that testifies that neither a person's mother nor father, sister nor brother, shaman nor psychotherapist, is the exhaustive source of the client's worth but rather that some larger structure of meaning and being is this source.'¹⁸

Clients hold a range of presuppositions and spiritual assumptions that are deeply related to the sense that they make of themselves, others and the world. To bracket these out or

¹⁷ Charles Taylor, *The Secular Age* (Boston, MA: Harvard University Press, 2007), 622.

¹⁸ Don Browning, *Reviving Christian Humanism: The New Conversation on Spirituality, Theology and Psychology* (Philadelphia: Fortress, 2010), 102. For a measured attempt at showing how theological notions can both complement and adjust more secular approaches see Alastair V. Campbell, *Rediscovering Pastoral Care* (London: Darton, Longman and Todd, 1981).

suppress them in counselling can lead to frustration or at least a narrowing of goals. While many assumptions will require to be challenged, refined or even abandoned, this process itself will involve attention to wider philosophical and theological concerns. Here a fruitful dialogue is needed that brings together a broad array of disciplinary interests, not for the sake of achieving a totalising discourse but for the promotion of more holistic strategies to psychological well-being and personal fulfilment.¹⁹

The therapeutic context is one of several in which theological claims need to be engaged and constantly re-evaluated. It is at this interface between practical and systematic theology that the most creative work is sometimes conducted.²⁰ The increasingly technical and professionalised approach to theology in the modern academy may conceal some of the resources of the church's doctrinal and ethics traditions that have long had a therapeutic quality. Rooted in Biblical stories and injunctions, these constitute a powerful resource that is surprisingly salient in a therapeutic setting.²¹ The following examples offer some illustration of this feature of our traditions. These might be characterised as theological fragments, drawn from wider systems of theology and ethics, but capable of shedding sudden light in a secular context.²²

Self-love. At least since Augustine, the importance of loving oneself, as well as God and neighbour, has been stressed. This is a responsibility that is laid upon each person, yet it can readily be neglected for at least two reasons. Self-love can be presented as selfish and even narcissistic, and hence inimical to the love of one's neighbour in the outward orientation of the self. This can hardly be denied. Yet, when properly constituted, the love of one's self is correlative to the capacity to dispose oneself properly to the other including God. If the aforementioned philosophical description of the person is along the right lines, then the realisation of the self can only occur in the encounter with other persons. In the right ordering of relationships, the self is properly constituted. This is one way of reading Jesus' instruction about losing one's life in order to find it. A second reason for neglecting the love of self emerges from the tendency to over-stress guilt, particularly in a liturgical context. This may be a particular feature of western Christianity with its deep-seated fear of Pelagianism. Yet the language of repeated confession, if not tempered by other themes such as thanksgiving for what has been accomplished by divine grace – sadly reserved too often for funeral orations – can contribute to a self-loathing and an inability to overcome past burdens that prevent the practice of self-love. This applies to both body and soul. The abuse of one's health through substance addiction and unhealthy diet can proceed from an incapacity to love the self. Similarly, self-love is necessary for the life of the spirit in orienting itself toward God and love of one's neighbour.²³ To divide physical and spiritual health

¹⁹ See for example William West (ed.), *Exploring Therapy, Spirituality and Healing* (Basingstoke: Palgrave Macmillan, 2011).

²⁰ In this respect, David Lyall draws attention to the importance of 'cross-grained experience' in pastoral theology. See *The Integrity of Pastoral Case* (London: SPCK, 2001), 87. For an example of an approach to theodicy oriented towards pastoral contexts see Marilyn McCord Adams, *Christ and Horrors: The Coherence of Christology* (Cambridge: Cambridge University Press, 2006).

²¹ Similarly, a narrow and more medically inflected approach to psychotherapy might ignore some of the wider humanistic concerns of early pioneer figures.

²² I am borrowing this notion from Duncan Forrester, *Theological Fragments: Essays in Unsystematic Theology* (London: T&T Clark, 2005).

²³ In this context, Thomas Aquinas could affirm the importance of loving oneself and one's own body; see *Summa Theologiae* 2a2ae, Q25.4–5. Werner Jeanrond notes how this is strangely lacking from the 2006 Papal encyclical *Deus caritas est*; see his *Theology of Love* (London: Continuum, 2010), 165.

amongst different sets of experts is to ignore the ways in which the whole person functions.

The traditional stress on sanctification in Reformed theology might be viewed as proceeding from the recognition that we carry a responsibility to make the most of ourselves through the resources afforded by divine grace, even while acknowledging that this is never a smooth, unproblematic or perfected process. An account of proper self-love can thus function in a way that is correlated with love of God and love of one's neighbour, allowing all three to be inter-linked in ways that are vital for each.²⁴ Love of self, when properly ordered, can be viewed as a necessary correlate of the love of one's neighbour in terms of maintaining commitment to one's insights, responsibilities and integrity. In loving the other, the self requires a unity of purpose, organisation of time, adherence to core commitments and reciprocity of respect and freedom.²⁵

In an important study, Stephen Pattison notes the ways in which the discourse of sin and forgiveness can reinforce patterns of chronic shame instead of providing the intended release. A sense of worthlessness and defilement, often the result of abusive relationships, may be deepened by faulty notions of God as inquisitorial, these being further reinforced by liturgical practice. Unless complemented by other themes, monotonous confession that 'there is no health in us' can merely confirm the absence of self-esteem. A clearer discrimination between genuine guilt and chronic shame is here required. 'While guilty people need forgiveness, shamed people need a sense of valued self.'²⁶ This is required both by those who care for others, and those who are the recipients of such care.

Providence. The need to find a pattern to one's life runs deep in most of us, hence the importance of meaning-making in psychotherapy. This is unlikely to be a pre-determined route or carefully charted course to which we constantly adhere. Very few life stories have that narrative shape. But there persists a striving for an existence that admits of meaning. This might take the form of making some sense of what happens to us, of resolving hurt and recognising failure, of discerning a value in one's typical activities, and of reaching a place of increased wisdom. These elements can be grouped together under the theological rubric of providence.

The theology of providence is historically beset with mistakes – a near fatalism that ascribes too much to the rule of predetermined forces, a predestinarianism that substitutes God for fate, and an introspective preoccupation that tends to read too much significance into the myriad details of one's own individual biography.²⁷ Nevertheless, the providence attested in the Bible often describes the limitless capacity of divine grace for securing meaning and positive outcomes from the most unpromising of

²⁴ This argument for 'right self-love' is developed by Darlene Fozard Weaver, *Self-Love and Christian Ethics* (Cambridge: Cambridge University Press, 2002).

²⁵ See the discussion in Gene Outka, *Agape: an ethical analysis* (New Haven: Yale University Press, 1972), 55–74. For a measured assessment of arguments for the necessity of self-love in Christian ethics, see Oliver O'Donovan, *The Problem of Self-Love in St Augustine* (New Haven: Yale University Press, 1980).

²⁶ Stephen Pattison, *Shame: Theory, Therapy, Theology* (Cambridge: Cambridge University Press, 2000), 245.

²⁷ I have sought to develop these ideas in 'Theology of Providence', *Theology Today*, 67 (2010), 261–278.

circumstances. Adam and Eve are promised a victory of sorts, even as they are banished from Eden. Joseph is reconciled with his brothers down in Egypt. The return from exile in Babylon is through the liberating army of Cyrus. The foolishness of the cross is the wisdom of God to those who are perishing. This divine providence does not govern only nations and empires, but is found in hidden and insignificant places. A pattern of crucifixion and resurrection belongs to all baptised lives. The parables of the kingdom suggest small beginnings and a secret working of divine grace. These are found in the everyday and mundane contexts of ordinary human lives. The providential work of God is not reserved for the powerful, the successful or the fortunate; by contrast, it is more apparent in lives that would otherwise be regarded as weak, failing or unlucky.

A particular stress on the improvising power of divine providence can rescue us from the sense that our lives have parted company from God's purpose or have become so hopelessly broken that they cannot be mended or given any meaningful shape. The pattern that emerges from such accounts resonates with recent work on narrative therapy. Divine providence always gives us another chance; the future is never devoid of some potential. J. R. Lucas stresses the reactive, improvising and resourceful dimension of this providence. In his teaching, he often cited the analogy of the Persian carpet-maker whose skills could incorporate the successive mistakes of his apprentice son.²⁸

Vocation. If notions of providence can sometimes carry the risk of appearing too passive – much work in this area presents human beings as the objects rather than the agents of God's providence²⁹ – the concept of vocation points to ways in which persons can understand their activity as a unique exercise and accomplishment of what God intends for them. Vocation was an idea that was universalised at the time of the Reformation with Luther's argument for its secularisation. We can encounter God's call in the home and the workplace as much as in the monastery or church. While these notions of the estates in which vocation is discovered were rather static and overly concentrated on occupation, Luther's argument is still valid and widely accepted in modern ecumenical accounts of the ministry of the whole people of God, especially in Vatican II's *Lumen Gentium*. According to the New Testament, vocational gifts are distributed to the whole membership of the body of Christ. Karl Barth makes the point that throughout Scripture conversion is closely linked with the call of God – faith is always accompanied by a commission to service. In discovering this, the prophets and the apostles find themselves and their identity in relation to God. Similarly, a life today can be reoriented and have a meaning conferred through the discernment of some vocation. This does not require bright lights or loud voices, but only the discovery of a significance bestowed by God upon opportunities that are placed before us. This may require a process of discernment, but it can be a means of liberation when it replaces a sense of ennui or aimlessness.

Healing: The 20th century attention to psychotherapy and counselling has also contributed to a re-appropriation of the language of healing in theology. The synoptic gospels are of course replete with stories of people being healed, cured and made whole by Jesus but too often this has been occluded in Western approaches to the work of Christ, the Christian life and the sacraments with a overly exclusive focus on guilt and

²⁸ This account of providence is developed in J. R. Lucas, *Freedom and Grace* (London: SPCK, 1976).

²⁹ An exception is Ellen Charry, *God and the Art of Happiness* (Grand Rapids: Eerdmans, 2010) which stresses the ways in which human beings can sometimes be the agents of God's providential rule.

remission of sins. In recent theology and exegesis, particularly Pauline studies, greater weight has been given to the more participationist themes employed to express the work of Christ. Here the language of the *admirabile commercium* has been recovered and revitalised in both theology and liturgy; our lives and Christ's are brought together in a wondrous exchange. Thus the 'physical' notion of redemption which has been privileged in the Eastern tradition of the church has now been set alongside the more juridical themes that have hitherto dominated in the Latin West. These insights are now all commonplace and are found in many contemporary approaches to pastoral care.³⁰ A study of recent liturgy and hymnody reflects many of these gains from last century. In striking more pastoral and therapeutic notes, this has proved practically fruitful in its enrichment of worship.

I will weep when you are weeping;
when you laugh I'll laugh with you;
I will share your joy and sorrow
till we've seen this journey through.³¹

What is offered here is one theologian's attempt to recover important links with the practice of psychotherapy. In this encounter, theology does not remain unchanged – it functions as more than a catalyst – since its practice needs to be informed and partly shaped by descriptions of human personhood that offer insights from related discourses. Through this interaction, we can identify some therapeutic qualities of theology and its resonance in surprising ways. This is offered neither in the interests of compromising the distinctive subject matter of theology nor of pressing for a swift fusion of discourses. But theology can succeed here through displaying its salience for persons who are shaped by their striving for freedom and love. The interaction with psychotherapy is needed on both sides of the disciplinary divide, and there are sufficient resources out there to provide encouragement for the undertaking of that work today.³²

³⁰ See the use of the image of the 'wounded healer' in Alastair V. Campbell, *Discovering Pastoral Care* (London: Darton, Longman and Todd, 1986), 37–46.

³¹ For a discussion of the relationship between liturgy and pastoral care, see William H. Willimon, *Worship as Pastoral Care* (Abingdon: Nashville, 1982).

³² This essay is based on a lecture delivered in October 2012 at the Uniting Church Centre for Theology and Ministry in Melbourne. It derives from an AHRC/ESRC-funded project at the University of Edinburgh to investigate the relationship between Christianity, Psychotherapy and Spirituality in Scotland in the latter half of the twentieth century. For further details see:

<http://www.ed.ac.uk/schools-departments/divinity/research/projects/theology-therapy>.

I am particularly grateful to my colleague Professor Liz Bondi for many helpful comments on an earlier draft.